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Chapter 1.0

Part A Permit Application, Revision 1
(December 6, 2001)
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Attachment 51 River Protection Project Waste Treatment Plant 09/02

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1		<u>CHAPTER 1.0</u>
2		PART A PERMIT APPLICATION, REVISION 1 (DECEMBER 6, 2001)
3		
4		Contents
5 6	1.0	Introduction51-1-1
7		Part A, Dangerous Waste Permit Application Form 1, for the River Protection
8		Project – Waste Treatment Plant
9		
10		Part A, Dangerous Waste Permit Application Form 3, for the River Protection
11		Project – Waste Treatment Plant

Attachment 51 River Protection Project Waste Treatment Plant 09/02

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1	1.0 INTRODUCTION
2	
3	PART A
4	The Part A, Dangerous Waste Permit Application (DWPA) Form 1, for the River Protection
5	Project – Waste Treatment Plant (WTP) is included in the following pages. The form includes a
6	figure showing the location of the WTP on the Hanford Site.
7	
8	The Part A, DWPA Form 3, for the WTP is included immediately after Form 1.

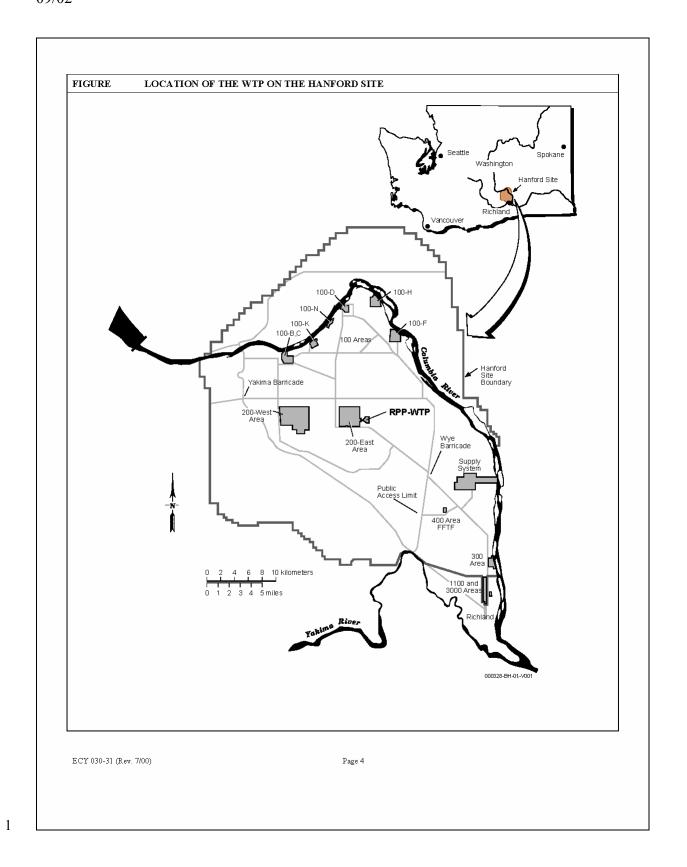
Attachment 51 River Protection Project Waste Treatment Plant 09/02

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FORM 1	HATTIN TO I	Washingto Dangerous Wa General Info ead "Form 1 instructions"	aste Pei ormatio	n	W		. EPA/: 8 9 (D. No.
I. NAME OF F	ACILITY								
US Depa	rtment of Energy - 1	Hanford Facility							
II. FACILITY									
	nd Title (last, first, & t eith A., Manager	itle)					. Phone (509) 376		e & no.)
	MAILING ADDRE	700				(.	09) 3/0	-/ 39 3	
A. Street or		مد							
PO Box	550								
B. City o	r Town							C. State	D. Zip Code
Richland								WA	99352
		IGURE ON PAGE 4)							
	oute No., or Other Sp	ecific Identifier							
Hanford									
B. County I	Name								
Benton C. City or 7	Fown				D. State	E. Zip ('ode	F	County Code (if known)
Richland					WA	99352		00.	•
VI. SIC CODE:	S (4-digit, in order c	of priority)							
A. First				B. Sec	ond				
9999	(specify) Nonclassif	iable		4953		Ref	use Syst	ems	
A. Third				B. For	ırth				
9511	(specify) Air and Wa Manageme	ater Resource and Solid Vent	Waste	8733		Res	earch N	oncomn	ercial
VII. OPERATO A. Name	R INFORMATION	<u> </u>					B. Is th	ne name l	isted in Item VII-A
Department of I	Energy * Owner/Op	erator						the own	er?
	al, Inc. ** Co-operat						X YE	ES*	□NO
	'	appropriate letter into the a		if "Othe	er," specify).		hone (ar		t no.)
F = Fede $P = State$		her than federal or state) O = Other (specify)	(specify) F				9) 376–73 9) 371-35		
E. Street or	P.O. Box					_			
P.O. Box 3000 Ge	: 550* orge Washington W	ay**							
F. City or	Town		G. Stat	te	H. Zip		. INDIA		d on Indian lands?
	d		777.4	1	99352		re racini YES	y locate	
Richlan	u		WA	Į))JJ_				

Attach to this application a topographic map map must show the outline of the facility, th each of its hazardous waste treatment, storag Include all springs, rivers, and other surface	ge or disposal facilities, and each well w	oposed intake and discharge structures, there it injects fluids underground.
X. NATURE OF BUSINESS (provide a brief de	•	uctions for precise requirements.
Treatment by vitrification of radioactive dan	gerous waste	
rreading of vidirication of radioactive dan	gerous waste.	
XI. CERTIFICATION (see instructions)		
I certify under penalty of law that I have persona uttachments and that, based on my inquiry of tho upplication, I believe that the information is true Calse information, including the possibility of fine	se persons immediately responsibility for ol , accurate, and complete. Iam aware that t	btaining the information contained in the
A. Name & Official Title (Type or print)	B. Signature	C. Date Signed
11.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1		

Part A Form 1 Certification XL CERTIFICATION	
I certify under penalty of law that this document and all attachmer supervision in accordance with a system designed to assure that quevaluate the information submitted. Based on my inquiry of the paystem, or those persons directly responsible for gathering the into the best of my knowledge and belief, true, accurate, and complementation for submitting false information, including the possibility violations.	ualified personnel properly gather and erson or persons who manage the ormation, the information submitted is, ete. I am aware that there are significant
Owner/Operator Keith A. Klein, Manager U.S. Department of Energy, Richland Operations Office	Date
Owner/Operator Harry L. Boston, Manager U.S. Department of Energy, Office of River Protection	Date
Co-operator R. F. Naventi, Project Manager River Protection Project – Waste Treatment Plant Bechtel National, Inc.	Date
ECY 030-31 (Rev. 7/00) Page 3	



				1. EPA/S	State I.D. No.
FORM 3	Dangerous W	aste Permit Application	ו	W A 7 8 9	9 0 0 0 8 9 6 7
FOR OFFICIAL	LISE ONLY				
Application		Comments			
Approved	(month/day/year)	comments			
Approved	(month/day/year)				
	EVISED APPLICATION				
submitting for yo	ur facility or a revised appli	B below (mark one box only) to in cation. If this is your first applic n, enter your facility's EPA/STA	ation and y	ou already know you	r facility's EPA/STATE
		nd provide the appropriate date)			
	g Facility (see instructions acility. Complete item below		2. New Fac	cility (complete item	below.)
existing 1		facilities, provide the		For nev	w facilities, provide the
MO DAY		y/yr) operation began	MO DA		w raemines, provide me no/day/yr) operation began
		construction commenced.	-+		
3 2 2	1 2 . 2	xes to the left.)		or is ex	epected to begin.
Darward Anni	`	v and complete Section 1 above.)			
5. Kevisea Appi	ication (place an A below	valid complete section 1 above.)			
X 1. Facility has	s an Interim Status Permi	t X	2. Facility	has a Final Permit	
·			2. Facility	nas a rinai r crinic	
	S – CODES AND DESIG				1
		ist of process codes below that be			
lines are provi	ded for entering codes. If n	nore lines are needed, enter the co	ode(s) in the	space provided. If	a process will be used that
is not included	l in the list of codes below.	then describe the process (include	ing its desig	n capacity) in the sp	ace provided on the
(Section III-C				, 	-
(Beerlon III-C	,.				
`		entered in column A enter the en	manity of th	o process	
B. Process Desig	n Capacity - for each code	entered in column A, enter the ca	apacity of th	e process.	
B. Process Desig 1. Amount - E	n Capacity - for each code nter the amount.			•	
3. Process Desig 1. Amount - E	n Capacity - for each code nter the amount.	entered in column A, enter the catered in column B (1), enter the c		•	es codes below that
3. Process Desig 1. Amount - E 2. Unit of Mea	n Capacity - for each code nter the amount. nsures - For each amount en		ode from th	e list of unit measure	es codes below that
3. Process Desig 1. Amount - E 2. Unit of Mea	n Capacity - for each code nter the amount. nsures - For each amount en	tered in column B (1), enter the c	ode from th	e list of unit measure should be used.	es codes below that
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3. Process Desig 1. Amount - E 2. Unit of Mer describes th PROCESS torage: Container (bardank Waste Pile Surface Impoundisposal: Injection Well	n Capacity - for each code nter the amount. usures - For each amount en e unit of measured used. O	PROCESS CODE S01 S02 S03 S04 D80	Gallons of	te list of unit measurer should be used. ROPRIATE UNITS PROCESS DESIGNATION OF liters or liters rds or cubic meters or liters or liters	OF MEASURE FOR GN CAPACITY
3. Process Desig 1. Amount - E 2. Unit of Mea describes th PROCESS storage: Container (barre Tank Waste Pile Surface Impoundisposal:	n Capacity - for each code nter the amount. usures - For each amount en e unit of measured used. O	PROCESS CODE S01 S02 S03 S04	ode from the isted below APP. Gallons of Gallons of Cubic ya Gallons of Gallons of Acre-fee	te list of unit measurer should be used. ROPRIATE UNITS PROCESS DESIGNATION OF LITTING THE STATE OF LITTING THE	OF MEASURE FOR GN CAPACITY
3. Process Desig 1. Amount - E 2. Unit of Mea describes th PROCESS torage: Container (barre Tank Waste Pile Surface Impoundisposal: Injection Well Landfill	n Capacity - for each code nter the amount. usures - For each amount en e unit of measured used. On the drum, etc.)	PROCESS CODE S01 S02 S03 S04 D80 D81	ode from the isted below APP. Gallons of Gallons of Gallons of Gallons of Gallons of Acre-feet one foot)	te list of unit measurer should be used. ROPRIATE UNITS PROCESS DESIGNATE OF LITTERS To liters	OF MEASURE FOR GN CAPACITY
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3. Process Desig 1. Amount - E 2. Unit of Mea describes th PROCESS torage: Container (barre Tank Waste File Surface Impoun Disposal: Injection Well Landfill Land Applicatic Ocean Disposal Surface Impoun Treatment: Tank Surface Impoun Incinerator	n Capacity - for each code nter the amount. usures - For each amount en e unit of measured used. O el, drum, etc.) udment on dement	PROCESS CODE S01 S02 S03 S04 D80 D81 D82 D83 D84 T01 T02 T03	Gallons of	te list of unit measure should be used. ROPRIATE UNITS PROCESS DESIGNATE OF LITTS O	G OF MEASURE FOR GN CAPACITY d cover one acre to a depth o
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III. PROC	тоого	,	CODES	AIND	DESIGN	CAPACITIES	(сопшние	IJ
-	1 0	2	1 1	-	21 TTT (1	. 1.	1 37.1	1

Example for Completing Section III (shown in line numbers X-1 and X-2 below): A facility has two storage tanks, one tank can hold 200 gallons and the other can hold 400 gallons. The facility also has an incinerator that can burn up to 20 gallons per hour.

				B. Process Design Capacity							
Line	A. Process Code		A. Process Code	2. Unit of M	1						
No.	(from list above)		n list above) 1. Amount (specify)		(enter	(enter code)			For Official Use Only		
X-1	S	0	2	600	G						
X-2	T	0	3	20	E						
1	S	0	1	2,780,000	G						
2	S	0	2	4,735,000	G						
3	Т	0	1	29,000	U						
4	Т	0	4	Vit 15,000	U						
5	Т	0	4	Containment Bldg. 16,000	U						
6											
7											
8											
9											
10											

C. Space for Additional process codes or for describing other process (code "T04"). For each process entered here include design capacity.

Line No. 4 - T04 = Treatment in miscellaneous units by vitrification.

 $Line\ No.\ 5-T04 \equiv Treatment\ in\ miscellaneous\ units,\ in\ containment\ buildings\ for\ vitrified\ waste\ and\ secondary\ waste.$

IV. DESCRIPTION OF DANGEROUS WASTES

A. Dangerous Waste Number - Enter the digit number from Chapter 173-303 WAC for each listed dangerous waste you will handle.

If you handle dangerous wastes which are not listed in Chapter 173-303 WAC, enter the four-digit number(s) that describes the characteristics and/or the toxic contaminants of those dangerous wastes.

B. Estimated Annual Quantity - For each listed waste entered in Column A, estimate the quantity of that waste that will be handled on an annual basis. For each characteristic or toxic contaminant entered in column A, estimate the total annual quantity of all the non-listed waste(s) that will be handled which possess that characteristic or contaminant.

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IV. DESCRIPTION OF DANGEROUS WASTES (continued)

C. Unit of Measure – For each quantity entered in column B, enter the unit of measure code. Units of measure which must be used and the appropriate codes are:

ENGLISH UNIT OF MEASURE	CODE	METRIC UNIT OF MEASURE	CODE
Pounds	P	Kilograms	K
Tone	T	Metric Tons	M

If facility records use any other unit of measure for quantity, the units of measure must be converted into one of the required units of measure taking into account the appropriate density or specific gravity of the waste.

D. PROCESSES

1 Process Codes:

For listed dangerous waste: For each listed dangerous waste entered in column A, select the code(s) from the list of process codes contained in Section III to indicate how the waste will be stored, treated, and/or disposed of at the facility.

For non-listed dangerous waste: For each characteristic or toxic contaminant entered in column A, select the code(s) from the list of process codes contained in Section III to indicate all the processes that will be used to store, treat, and/or dispose of all the non-listed dangerous wastes that possess that characteristic or toxic contaminant.

Note: Four spaces are provided for entering process codes. If more are needed: (1) Enter the first three as described above; (2) Enter "000" in the extreme right box of Item IV-D (1); and (3) Enter in the space provided on page 4, the line number and the additional code(s).

- 2 Process Description: If a code is not listed for a process that will be used, describe the process in the space provided on the form.
 Note: Dangerous wastes described by more than one dangerous waste number Dangerous wastes that can be described by more than one Waste Number shall be described on the form as follows:
- 1 Select one of the Dangerous Waste Numbers and enter it in column A. On the same line complete columns B, C, and D by estimating the total annual quantity of the waste and describing all the processes to be used to treat, store, and/or dispose of the waste.
- 2 In column A of the next line, enter the other Dangerous Waste Number that can be used to describe the waste. In column D (2) on that line, enter "included with above" and make no other entries on that line.
- 3 Repeat step 2 for each other Dangerous Waste Number that can be used to describe the dangerous waste.

Example for completing Section IV (shown in line numbers X-1, X-2, X-3, and X-4 below) – A facility will treat and dispose of an estimated 900 pounds per year of chrome shavings from leather tanning and finishing operation. In addition, the facility will treat and dispose of three non-listed wastes. Two wastes are corrosive only and there will be an estimated 200 pounds per year of each waste. The other waste is corrosive and ignitable and there will be an estimated 100 pounds per year of that waste. Treatment will be in an incinerator and disposal will be in a landfill.

						D. Processes				D. Processes		
Line No.	A. D		ıs Waste ∙ <i>code</i>)	No.	B. Estimated Annual Quantity of Waste	nit of M enter cod		1. Pro	cess Cod	es (en	ter)	2. Process Description (if a code is not entered in D(1))
X-1	K	0	5	4	900	P		T03	D80			
X-2	D	0	0	2	400	Р		T03	D80			
X-3	D	0	0	1	100	Р		T03	D80			
X-4	D	0	0	2				T03	D80			included with above

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W A 7 8 9 0 0 0 8 9 6 7

v. DE	SCRIPTION OF	os (con	unned)				D. Pro	cesses	
Line No.	A. Dangerous Waste No. (enter code)	B. Estimated Annual Quantity of Waste		nit of Mea enter code	1. Proces	ss Codes <i>(e</i>	nter)		2. Process Description (if a code is not entered in D(1))
1	D001	51,000	Т		S02				
2	D003				S02				Included with above
3	D002				T01	S02			Included with above
4	D004				T01	S02			Included with above
5	D005				T01	S02			Included with above
6	D006				T01	S02			Included with above
7	D007				T01	S02			Included with above
8	D008				T01	S02			Included with above
9	D009				T01	S02			Included with above
10	D010				T01	S02			Included with above
11	D011				T01	S02			Included with above
12	D018				T01	S02			Included with above
13	D019				T01	S02			Included with above
14	D022				T01	S02			Included with above
15	D028				T01	S02			Included with above
16	D029				T01	S02			Included with above
17	D030				T01	S02			Included with above
18	D033				T01	S02			Included with above
19	D034				T01	S02			Included with above
20	D035				T01	S02			Included with above
21	D036				T01	S02			Included with above
22	D038				T01	S02			Included with above
23	D039				T01	S02			Included with above
24	D040				T01	S02			Included with above
25	D041				T01	S02			Included with above
26	D043				T01	S02			Included with above

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Page 4A

ID Number (enter from page 1)

W A 7 8 9 0 0 0 8 9 6 7

IV DESCRIPTION	J OF DANGEROUS	WASTES (continued)

		F DANGEROUS WASTE		D. Processes						
Line No.	A. Dangerous Waste No. <i>(enter code)</i>	B. Estimated Annual Quantity of Waste	nit of M enter co	1. Proces	ss Codes <i>(e.</i>	nter)		2. Process Description (if a code is not entered in D(1))		
1	WT01			T01	S02			Included with above		
2	WT02			T01	S02			Included with above		
3	WP01			T01	S02			Included with above		
4	WP02			T01	S02			Included with above		
5	F001			T01	S02			Included with above		
6	F002			T01	S02			Included with above		
7	F003			T01	S02			Included with above		
8	F004			T01	S02			Included with above		
9	F005			T01	S02			Included with above		
10	F039 ^a			T01	S02			Included with above		
11										
12										
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Page 4B

ID Number (enter from page 1)

W A 7 8 9 0 0 0 8 9 6 7

TV DECODIDATION	OF DANCEDOTIC	WASTES (continued)

		DANGEROUS WASTI	1		D. Processes						
Line No.	A. Dangerous Waste No. (enter code)	B. Estimated Annual Quantity of Waste		nit of M <i>(enter cod</i>	1. Proces	ss Codes <i>(e</i>	nter)		2. Process Description (if a code is not entered in D(1))		
1	D002	33,500	Т		T04	S01			Vitrification treatment process and storage of ILAW and IHLW		
2	D004				T04	S01			Included with above		
3	D005				T04	S01			Included with above		
4	D006				T04	S01			Included with above		
5	D007				T04	S01			Included with above		
6	D008				T04	S01			Included with above		
7	D009				T04	S01			Included with above		
8	D010				T04	S01			Included with above		
9	D011				T04	S01			Included with above		
10	D018				T04	S01			Included with above		
11	D019				T04	S01			Included with above		
12	D022				T04	S01			Included with above		
13	D028				T04	S01			Included with above		
14	D029				T04	S01			Included with above		
15	D030				T04	S01			Included with above		
16	D033				T04	S01			Included with above		
17	D034				T04	S01			Included with above		
18	D035				T04	S01			Included with above		
19	D036				T04	S01			Included with above		
20	D038				T04	S01			Included with above		
21	D039				T04	S01			Included with above		
22	D040				T04	S01			Included with above		
23	D041				T04	S01			Included with above		
24	D043				T04	S01			Included with above		
25	WT01				T04	S01			Included with above		
26	WT02				T04	S01			Included with above		

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Page 4C

ID Number (enter from page 1)

W A 7 8 9 0 0 0 8 9 6 7

TX	DECCI	NOTTON	OUS WASTES	(anutium all)

					 D. Processes						
Line No.	A. Dangerous Waste No. <i>(enter code)</i>	B. Estimated Annual Quantity of Waste		nit of M enter co	1. Proces	s Codes <i>(e.</i>	nter)		2. Process Description (if a code is not entered in D(1))		
1	WP01				T04	S01			Included with above		
2	WP02				T04	S01			Included with above		
3	F001				T04	S01			Included with above		
4	F002				T04	S01			Included with above		
5	F003				T04	S01			Included with above		
6	F004				T04	S01			Included with above		
7	F005				T04	S01			Included with above		
8	F039				T04	S02			Included with above		
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Page 4D

ID Number (enter from page 1)

W A 7 8 9 0 0 0 8 9 6 7

	SCRIPTION OF	1		D. Processes						
Line No.	A. Dangerous Waste No. (enter code)	B. Estimated Annual Quantity of Waste		nit of Meas enter code)	1. Proces	ss Codes <i>(e</i>	nter)		2. Process Description (if a code is not entered in D(1))	
1	D002	1,800	Т		T04	S01			Treatment and storage in containment buildings	
2	D004				T04	S01			Included with above	
3	D005				T01	S01			Included with above	
4	D006				T04	S01			Included with above	
5	D007				T04	S01			Included with above	
6	D008				T04	S01			Included with above	
7	D009				T04	S01			Included with above	
8	D010				T04	S01			Included with above	
9	D011				T04	S01			Included with above	
10	D018				T04	S01			Included with above	
11	D019				T04	S01			Included with above	
12	D022				T04	S01			Included with above	
13	D028				T04	S01			Included with above	
14	D029				T04	S01			Included with above	
15	D030				T04	S01			Included with above	
16	D033				T04	S01			Included with above	
17	D034				T04	S01			Included with above	
18	D035				T04	S01			Included with above	
19	D036				T04	S01			Included with above	
20	D038				T04	S01			Included with above	
21	D039				T04	S01			Included with above	
22	D040				T04	S01			Included with above	
23	D041				T04	S01			Included with above	
24	D043				T04	S01			Included with above	
25	WT01				T04	S01			Included with above	
26	WT02				T04	S01			Included with above	

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ID Number (enter from page 1)

W A 7 8 9 0 0 0 8 9 6 7

TX	DECCI	NOTTON	OUS WASTES	(anutium all)

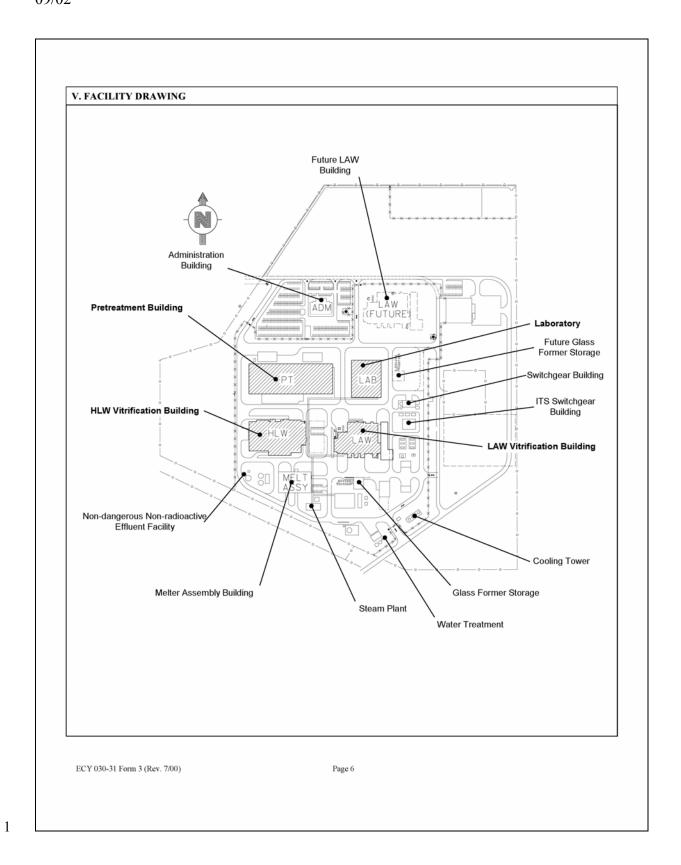
· · · DE				<i></i>	 D. Processes						
Line No.	A. Dangerous Waste No. (enter code)	B. Estimated Annual Quantity of Waste		nit of M enter cod	1. Proces	s Codes <i>(e.</i>	nter)		2. Process Description (if a code is not entered in D(1))		
1	WP01				T04	S01			Included with above		
2	WP02				T04	S01			Included with above		
3	F001				T01	S01			Included with above		
4	F002				T04	S01			Included with above		
5	F003				T04	S01			Included with above		
6	F004				T04	S01			Included with above		
7	F005				T04	S01			Included with above		
8	F039 ^a				T04	S01			Included with above		
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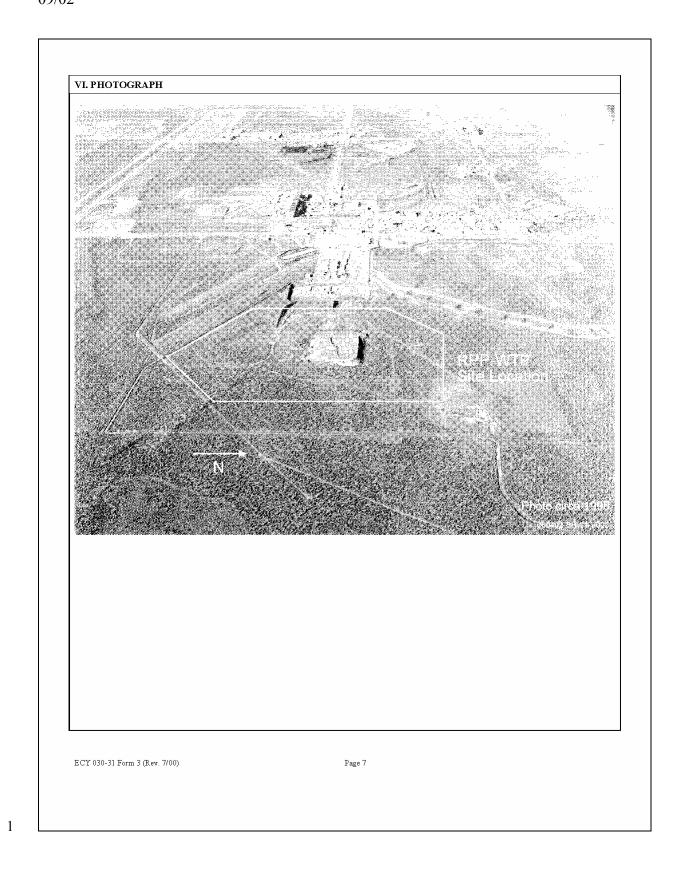
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IV. DESCRIPTION OF DANGEROU	S WASTES (continued)						
E. Use this space to list additional proces	s codes from Section D(1)					
a. F039 is a multisource leachate include	ed as a waste derived from	non-specific sou	rce wastes F001	through	h F005.		
V. FACILITY DRAWING							
See facility drawing, including all existing fa	cilities, on page 6.						
VI. PHOTOGRAPHS							
See facility photograph on page 7							
VII. FACILITY GEOGRAPHIC LOC LATITUDE (degrees, minutes, & second		Longitude (degrees	s, minutes, & second	ls			
46 33 07		119	30 23				
VIII. FACILITY OWNER		•					
A. If the facility owner is also the f	facility operator as listed in	n Section VII on I	Form 1. "Genera	d Inforn	nation." p	lace an "I	X" in
— the box to the left and skin to se					, Р		
B. If the facility owner is not the fa	cility operator as listed in	Section VII on F	orm 1, complete	the foll	lowing:		
1. Name of Facility's Legal Owner			B. Phone I	Number	c (ama co	do de no 1	
1. Ivane of Lacinty 5 Degai Owner	See Form 1 page		B. Thone	1 valifoci	. (area co	xe & 110.)	
			_1				
3. Street or P.O. Box	4. City or Town		5. State		6. Zip C	ode	
	: I : : :		1 : :		l :	: :	
IX. OWNER CERTIFICATION							
I certify under penalty of law that I have	personally examined and	am familiar with	the information	submitt	ed in this	and all as	tached
documents, and that based on my inquiry	of those individuals imm	ediately responsil	ole for obtaining	the info	rmation,	I believe	
submitted information is true, accurate, a		that there are sig	gnificant penalti	es for sı	ıbmitting .	false	
information, including the possibility of j Name (print or type)			Date Sig	med			
See attached certification	Signature		Date Sig	,iicu			
V ODED A TOD GED TIFIGATION							
X. OPERATOR CERTIFICATION I certify under penalty of law that I have	personally examined and	am familiar with	the information	submitt	ed in this	and all as	ttached
	of those individuals imm	ediately responsil	ole for obtaining	the info	rmation,	I believe	
documents, and that based on my inquiry		that there are sig	gnificant penalti	es for sı	ubmitting .	false	
submitted information is true, accurate, a			I D-4. 6:-	med			
submitted information is true, accurate, a information, including the possibility of j			1 Date Sto				
submitted information is true, accurate, a information, including the possibility of j	Signature Signature		Date Sig	,			
documents, and that based on my inquiry submitted information is true, accurate, a information, including the possibility of j Name (print or type) See attached certification			Date Sig				

51-1-16





Part A Form 3 Certification	
certify under penalty of law that this document and all attachment upervision in accordance with a system designed to assure that quivaluate the information submitted. Based on my inquiry of the pystem, or those persons directly responsible for gathering the infector the best of my knowledge and belief, true, accurate, and complete penalties for submitting false information, including the possibility includings.	ualified personnel properly gather and erson or persons who manage the ormation, the information submitted is, etc. I am aware that there are significant
Owner/Operator Keith A. Klein, Manager U.S. Department of Energy, Richland Operations Office	Date
Owner/Operator Harry L. Boston, Manager U.S. Department of Energy, Office of River Protection	Date
Co-operator R. F. Naventi, Project Manager River Protection Project – Waste Treatment Plant Bechtel National, Inc.	Date
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Attachment 51
River Protection Project Waste Treatment Plant
09/02

24590-WTP-DWPA-ENV-01-001, Rev. 1 WTP Dangerous Waste Permit Application

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